Council, 9 February 2012

Strategic intent 2012-2015

Executive summary and recommendations

Introduction

At the Council's away day in October 2012, the Council discussed the existing strategic intent document for 2009/10 to 2014/2015. There was widespread consensus that only minor changes were necessary to the strategic objectives outlined in the document.

The strategic intent document has been updated and revised, taking into account the Council's discussion. The changes incorporated into the attached document include the following.

- The strategic intent is proposed for the period 2012 to 2015, as a general election is expected in 2015 which may change the external policy environment significantly. The strategic intent document would in any event be kept under review and revised where there are significant changes to the internal or external environment.
- The section on external drivers (page three) has been updated to take account of the publication of 'Enabling Excellence' and the Health and Social Care Bill 2011.
- The strategic objectives (from page five) have been revised in light of the feedback of Council members.

Section four on page four reflects the suggestions made by Council members for the vision statement. The Council is invited to discuss and agree the text of the vision statement at this meeting.

Decision

The Council is invited to:

- discuss and agree the text of the vision statement to be included in section four of the document; and
- discuss and agree (subject to any changes agreed by the Council) the text of the document.

The Council may wish to invite the Executive to present a final draft for approval at the March 2012 Council meeting.

Background information None

Resource implications None

Financial implications None

Appendices None

Date of paper 30 January 2012



Strategic intent - 2012 to 2015

1. Introduction

About this document

- 1.1 This document outlines the Health Professions Council's (HPC's) strategic intent for the period 2012 to 2015, setting out the HPC's strategic objectives for this period.
- 1.2 This document replaces the strategic intent published in 2009 for the period 2009/2010 to 2014/2015. This document was previously published in 2002, 2004, 2006 and 2007.
- 1.3 This document will be kept under continual review and may be revised if there are significant changes to the internal and external environment.

About us

- 1.4 We are a regulator and were set up to protect the public. To do this, we keep a register of professionals who meet our standards for their professional skills and behaviour. Individuals on our Register are called 'registrants'.
- 1.5 We currently regulate 15 professions.
 - Arts therapists
 - Biomedical scientists
 - Chiropodists / podiatrists
 - Clinical scientists
 - Dietitians
 - Hearing aid dispensers
 - Occupational therapists
 - Operating department practitioners
 - Orthoptists
 - Paramedics
 - Physiotherapists
 - Practitioner psychologists
 - Prosthetists / orthotists
 - Radiographers
 - Speech and language therapists
- 1.6 To protect the public we:
 - set standards for entry to the Register and for continued registration;
 - approve education and training programmes that successfully deliver those standards;
 - maintain a register of individuals who successfully complete those programmes; and
 - take action if the standards may not have been met (for example, via our fitness to practise process).

1.7 Unlike other health regulators, our legislation gives us discretionary powers to make recommendations to the Secretary of State on the regulation of new groups.

2. External drivers

- 2.1 The Command Paper 'Enabling Excellence Autonomy and Accountability for Healthcare Workers, Social Workers and Social Care Workers' (2011) and the legislative changes emerging from the Health and Social Care Bill 2011 will be crucial external drivers in this period.
- 2.2 One key external policy development is the introduction of voluntary registration. This includes the HPC's forthcoming discretionary powers to establish voluntary registers; the role of the Professional Standards Authority for Health and Social Care (formerly the Council for Healthcare Regulatory Excellence or 'CHRE') in accrediting voluntary registers; and government policy that the Department of Health and the HPC should, by the end of 2013, explore the feasibility of establishing a voluntary register for social care workers.
- 2.3 In 2012, the HPC will become responsible for the regulation of social workers in England. It is also government policy that the HPC should become responsible for holding a register of 'persons authorised to dispense unlicensed herbal medicines' and open a Register for non-medical public health specialists.
- 2.5 Other developments which will, are likely to, or may affect the HPC significantly in this period, include the following.
 - A change in name to the 'Health and Care Professions Council' in order to reflect the HPC's enlarged remit.
 - A reduction in the size of the regulatory bodies' Councils.
 - The CHRE review of the cost-effectiveness and efficiency of the health professional regulators.
 - The Law Commission review of the regulatory bodies' legislation which may result in changes to legislation.
- 2.6 The strategic objectives outlined in this document have been developed with reference to these external influences. However, this document will be kept under review and revised when there are significant changes to the internal or external environment.

3. Internal drivers

3.1 The HPC has a well-established culture of continuous quality improvement across all its departments. This culture acts as a catalyst for ongoing review of processes and implementing improvements. This aspect of the culture of the HPC also guards against any sense of complacency and reflects the overall values of the organisation.

4. Vision and values [To be completed]

Our vision

4.1 In previous discussion Council members suggested the following.

'To be recognised internationally as a model of good practice in the regulation of health and care professionals'¹

'To demonstrate good practice in the regulation of health and care professionals'

'To be recognised as world class in the regulation of health and care professionals'

Values

- 4.2 Our values are a set of guiding principles which reflect both the social context in which the organisation operates and its aim to deliver effective and efficient regulation.
- 4.3 Our values are:
 - Transparency
 - Collaboration
 - Responsiveness
 - Value for money
 - High quality service

¹ This is the wording from the previous document with the addition of 'and care' to reflect the HPC's new name and enlarged remit

5. Strategic objectives

5.1 The diagram illustrates how the strategic objectives are linked to the organisation's central commitment to public protection.



[Note: This diagram will be updated to take account of changes to the strategic objectives and the vision statement agreed by the Council]

- 5.2 The bullet points beneath each objective indicate ways in which each objective might be achieved and the scope of each objective. They are not intended to be exhaustive and are for indicative purposes only. However, they do give some indication as to how these objectives will be embedded in workplans and progress reviewed by the Council and its Committees.
- 5.3 The HPC's strategic objectives for 2012 to 2015 follow.

Objective 1: Good governance

To maintain, review and develop good corporate governance

- To ensure continued financial probity and sustainability.
- To ensure continued risk management.
- To maintain regular monitoring of performance against objectives.
- To continue to invest in training of employees and Council members to develop skills.
- To continue to operate the annual performance review of Council members and Chair.

• To proactively respond to and prepare for planned reforms to the governance arrangements of the regulators.

Objective 2: Efficient business processes

To maintain, review and develop efficient business processes throughout the organisation

- To continue to promote a culture of continuous quality improvement.
- To maintain, review and develop standards and processes as required across all functions.
- To ensure continued compliance with external quality assurance frameworks.
- To maintain, review and develop organisation-wide policies including equality and diversity and corporate social responsibility policies.
- To build partnerships with suppliers to ensure value for money procurement.
- To increase the benefit and reduce the cost of regulation.

Objective 3: Communication

To increase understanding and awareness of regulation amongst all stakeholders

- To raise understanding of the HPC's role across all key stakeholder groups.
- To extend engagement with the public through improved access to information about the HPC.
- To engage with registrants to increase understanding of the benefits of regulation, the work of the HPC and what is required of them.
- To engage with employers, government and other regulators.
- To continue to participate in and contribute to UK and international regulatory forums.

Objective 4: To build the evidence base of regulation

To ensure that the organisation's work is evidence based

- To undertake research into HPC's current regulatory processes (for example, fitness to practise, education, registration, CPD).
- To ensure that HPC and other research findings contribute to the HPC's decision making.
- To ensure that research findings are disseminated.
- To use seminars to discuss research findings with stakeholders.
- To ensure that the findings of HPC research contribute to the development of wider regulatory policy.

Objective 5: Influence the policy agenda

To be proactive in influencing the wider regulatory policy agenda

- To continue to make recommendations to the Secretary of State for Health and Scottish ministers about the statutory regulation of professions / occupations where appropriate.
- To continue to explore and draw conclusions about the establishment of voluntary registers.

Objective 6: Engagement in the four countries

To ensure that our approach to regulation takes account of differences between the four countries

- To continue to build relationships and increase mutual understanding through meetings with stakeholders in England, Scotland, Wales and Northern Ireland.
- To continue to monitor the need for changes to the HPC's physical presence in Scotland, Wales and Northern Ireland with reference to changes in policy and context.

6. Measuring success

- 6.1 The strategic priorities outlined in this document will be embedded and 'operationalised' in the workplans produced by each department or directorate.
- 6.2 These workplans set out each department's work and priorities, including anticipated completion dates, in light of the strategic direction set by the Council.
- 6.3 These workplans are approved, and subsequently monitored, by the Council or a Committee, as appropriate.

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